

City of Duluth

Notice of Job Assignment and Performance Requirements

Employee Name _____

Date _____

A determination of your fitness for duty has been made. In accordance with Section _____ of your labor contract, you are hereby notified that, until further notice, your job assignment is:

The following features of your job assignment, or restrictions on your activities, are hereby implemented to reasonably allow you to do your work in a manner consistent with your medical condition:

The modified job assignment has been made after the City's determination that you can perform the job in your current condition. This determination is based upon the medical information, reports and observations, including the following:

Failure to perform the duties of this modified job will initiate a review process that may result in disciplinary action. Supervisors will be monitoring your attendance and job performance to ensure that the job modifications and restrictions are being utilized.

Employee Comments:

Employee Signature _____

Date _____

This notice is given to employee by _____ on _____.

Supervisor Signature _____

Employee Benefits Administrator Signature _____